U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

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| | For Official Use Only |
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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

| 1. File Number U - 2/06/ | 2, Fiscal Year Covered From | | |
|---|--|--|--|
| 7.7 He Walliote 9-2/00/ | | | |
| | 1 / 1 / 2004 Through: 12 / 31 / 2004 | | |
| 3. Name and address of person filing. | 4. Name, file number, and address of labor organization. | | |
| Name Emily Davis | Name IBEW Local Union 569 | | |
| | Labor Organization F le Number 034-254 | | |
| P.O. Box, Bldg., Room No., if any | P.O. Box, Building and Room Number, if any | | |
| Street 1448 Falcon Lane | Street 4545 Viewridge Avenue, #100 | | |
| City El Cajon | City San Diego | | |
| State California ZIF Coce + 4 92020 | State California ZIP Code + 4 92123-1633 | | |
| 5. Position :n labor organization. President | | | |
| | ur spouse or minor child directly or indirectly had any of the following interests e exclusions set forth in the instructions): | | |
| A. Held an interest in, engaged in transactions (including loans) wit monetary value from an employer whose employees your organ | | | |
| Name and address of Employer (including trade name, if any). | 7.a. Nature of Interest, *ransaction, or Income. | | |
| Name | | | |
| Trade Name, if any: | | | |
| P.O. Box, Bldg., Room No., if any | | | |
| , , | 7.b. Amount. | | |
| Street | | | |
| City | | | |
| State ZIP Code + 4 | | | |
| Signature | | | |
| | Signature | | |
| 15. Signature and verification. The undersigned declares, under pena submitted in this report (including the information contained in any accoundersigned's knowledge and belief, true, correct, and complete. (See | alty of Perjury and other applicable penalties of the law, that all of the information impanying documents), has been examined by the signatory and is, to the best of the | | |
| submitted in this report (including the information contained in any accord | alty of Perjury and other applicable penalties of the law, that all of the information impanying documents), has been examined by the signatory and is, to the best of the | | |

| Name of Person Filing * Emi | y Davis | File Number U- |
|-----------------------------|---------|----------------|
| | | |

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or setting or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name and address of Business (including trade name, if any). 9. Business deals with: Name San Diego Electrical Pension Trust X a. Labor Organization Trade Name, if any: b. Trust P.O. Box, Bldg., Room No., if any PO Box 231/19 c. Employer Street San Diego City ZIP Code + 4 92194-1219 State California 11.a. Nature of such dealing. 10. If 9.b. or 9.c. is checked give trust or employer's name Appointed by IBEW Local 569 as a labor Trustee. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 11.b. Approximate dollar value of such dealing. \$0 City 12.a. Nature of interest held or income received. Attendance at scheduled Board of Trustees meetings State ZIP Coce + 4 and/or related educational conferences.Lost wages and fringe benefits. 12.b. Amount. \$769

| 13.a. Name and address of Employer or | Labor Re at ons Consultant | 14.a. Nature of payment. | |
|---------------------------------------|----------------------------|--------------------------|--|
| (including trade name, if any). | | | |
| Name | | | |
| Trade Name, if any: | | | |
| P.O. Box, Bldg., Room No., if any | | | |
| Street | | | |
| City | | | |
| State | ZIP Cc de + 4 | | |
| 13.b. Is the Business an Employer | or Consultant ? | 14.b. Amount of payment. | |

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Part B Continuation Page

| 8. Name and address of Business (including trade name, if any). | 9. Business deals with: |
|---|---|
| Name San Diego Electrical Pension Trust | > / a Labor Organization |
| Trade Name, if any: | a. Labor Organization |
| P.O. Box, Bldg., Room No., if any PO Box 231219 | b. Trust |
| Street | c. Employer |
| City San Diego | |
| State California ZIP Code + 4 92194-1219 | • |
| 10. If 9.b. or 9.c. is checked give trust or employer's name. | 11.a. Nature of such dealing. |
| Name | Appointed by IBEW Local 569 as a labor Trustee. |
| Trade Name, if any: | |
| P.O. Box, Bldg., Room No., if any | |
| Street | |
| City | |
| State ZIP Code + 4 | 11.b. Approximate dollar value of such dealing. \$0 |
| | 12.a. Nature of interest held or income received. |
| | Attendance at scheduled Board of Trustees meetings and educational conferences. |
| | una caabactonar conferences. |
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| | 42 h Amount |
| | 12.b. Amount. \$1,399 |

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Part B Continuation Page

| 8. Name and | address of Business (including trade name, if any). | 9. Business deals with: | |
|-------------------------------------|---|--|--|
| Name San Diego Electrical H&W Trust | | ✓ a. Labor Organization | |
| Trade Name | if any: | a. Labor Organization | |
| P.O. Box, Bl | dg., Room No., if any PO Box 231219 | b. Trust | |
| Street | | c. Employer | |
| City _{San} | Diego | | |
| State Cali | fornia ZIP Code + 4 92194-1219 | | |
| 10. If 9.b. or 9. | c. is checked give trust or employer's name. | 11.a, Nature of such dealing. | |
| Name | | Appointed by IBEW Local 569 as a labor Trustee. | |
| Trade Name | , if any: | | |
| P.O. Box, Blo | dg., Room No., if any | | |
| Street | | | |
| City | | | |
| State | ZIP Code + 4 | 11.b. Approximate dollar value of such dealing. \$0 | |
| ļ | | 12.a. Nature of interest held or income received. | |
| | | Attendance at scheduled Board of Trustees meetings and/or related educational conferences. | |
| | | Lost Wages and fringe benefits. | |
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| | | | |
| | | | |
| | | 12.b. Amount. \$1,007 | |

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Part B Continuation Page

| 12.a. Nature of interest held or income received. | 8. Name and address of Business (including trade name, if any). | 9. Business deals with: |
|--|---|---|
| Trade Name, if any: P.O. Box, Bldg., Room No., if any po Box 2: 1219 Street City San Diego State California ZIP Code + 4 92194-1219 10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 11.a. Nature of such dealing. Appointed by IBEW Local 569 as a labor Trustee. City State ZIP Code + 4 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest field or income received. Attendance at scheduled Board of Trustees meetings | Name San Diego Electrical H&W Trust | ✓ a Labor Organization |
| P.O. Box, Bldg., Room No., if any PO Box 2:1219 Street City San Diego State California ZIP Code + 4 92194-1219 10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 11.a. Nature of such dealing. Appointed by IBEW Local 569 as a labor Trustee. 11.a. Nature of such dealing. Appointed by IBEW Local 569 as a labor Trustee. 12.a. Nature of interest held or income received. Attendance at scheduled Board of Trustees meetings | Trade Name, if any: | X d. Eddor organization |
| City San Diego State California ZIP Code + 4 92194-1219 10. If 9.b. or 9.c. is checked give trust or employer's name. Name . Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. Attendance at scheduled Board of Trustees meetings | P.O. Box, Bldg., Room No., if any PO Box 211219 | b. Trust |
| State California ZIP Code + 4 92194-1219 10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest reld or income received. Attendance at screduled Board of Trustees meetings | Street | c. Employer |
| 10. If 9.b. or 9.c. is checked give trust or employer's name. Name . Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 11.a. Nature of such dealing. Appointed by IBEW Local 569 as a labor Trustee. In the such dealing and the such dealing are such dealing. 11.a. Nature of such dealing. Appointed by IBEW Local 569 as a labor Trustee. In the such dealing are such dealing. 12.a. Nature of interest held or income received. Attendance at scheduled Board of Trustees meetings | City San Diego | |
| Name . Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest Feld or income received. Appointed by IBEW Local 569 as a labor Trustee. 13.6. Approximate dollar value of such dealing. 14.6. Approximate dollar value of such dealing. 15.6. Approximate dollar value of such dealing. 16.6. Approximate dollar value of such dealing. 17.6. Nature of interest Feld or income received. 18.6. Approximate dollar value of such dealing. 19.6. Approximate dollar value of such dealing. | State California ZIP Code + 4 92194-12 | 19 |
| Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIF Code + 4 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. Attendance at scheduled Board of Trustees meetings | 10. If 9.b. or 9.c. is checked give trust or employer's name. | 11.a. Nature of such dealing. |
| P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. Attendance at scheduled Board of Trustees meetings | Name | Appointed by IBEW Local 569 as a labor Trustee. |
| Street City State ZIP Code + 4 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. Attendance at scheduled Board of Trustees meetings | Trade Name, if any: | |
| City State ZIP Code + 4 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. Attendance at scheduled Board of Trustees meetings | P.O. Box, Bldg., Room No., if any | |
| State ZIP Code + 4 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. Attendance at scheduled Board of Trustees meetings | Street | |
| 12.a. Nature of interest held or income received. Attendance at scheduled Board of Trustees meetings | City | |
| Attendance at scheduled Board of Trustees meetings | State ZIP Code + 4 | 11.b. Approximate dollar value of such dealing. \$0 |
| | | 12.a. Nature of interest held or income received. |
| | | Attendance at screduled Board of Trustees meetings and educational conferences. |
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| | | |
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| 12.b. Amount. \$1,39 | | 12.b. Amount. \$1,399 |

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Part B Continuation Page

| 8. Name and address of Business (including trade name, if any). | 9. Business deals with: |
|--|---|
| Name San Diego Electrical Train:.rg Trust Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 4675 Viewridge Ave, Suite #D City San Diego State California ZIP Code + 4 92123 | a. Labor Organization b. Trust c. Employer |
| 10. If 9.b. or 9.c. is checked give trust or employer's name. | 11.a. Nature of such dealing. |
| Name | Appointed by IBEN Local 569 as a labor Trustee. |
| Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City | |
| State ZIP Code + 4 | 11.b. Approximate dollar value of such dealing. \$0 |
| | 12.a. Nature of interest held or income received. Reimbursement of Lost Wages and Fringe Benefits for attending Trustees meetings. |
| | 12.b. Amount. \$781 |

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Part B Continuation Page

| 8. Name and address of Busin | ness (including trade name, if any). | 9. Business deals with | |
|------------------------------|--|--|------|
| | any Ave, Suite #E ZIP Code + 4 92123 e trust or employer's name | a. Labor Organization b. Trust c. Employer 11.a. Nature of such dealing. Appointed by IBEN Local 569 as a labor Trustee. | |
| State | ZIP Code + 4 | 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. Meals provided at Trustee meetings and a ticket a graduation ceremony. | \$0 |
| | | 12.b. Amount. | \$63 |

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Part B Continuation Page

| 8. Name and address of Business (including trade name, if any). Name San Diego Elec. Training Acmin. Svcs. Corp. Trade Name, if any: b. Trust | |
|--|------|
| P.O. Box, Bldg., Room No., if any Street 4675 Viewridge Ave., #D City San Diego State California ZIP Code + 4 92123 | |
| 10. If 9.b. or 9.c. is checked give trust or employer's name 11.a. Nature of such dealing. | Ì |
| Name Appointed by IBEW Local 569 as a labor Trustee. | |
| Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City | |
| State ZIP Code + 4 11.b. Approximate dollar value of such dealing. | \$0 |
| 12.a. Nature of interest held or income received. Lost wages for attending Trustee meetings. | |
| 12.b. Amount. | \$32 |

| Name of | Person | Filina | Emily | Davis |
|-------------|--------|----------|--------|-------|
| INDIVIDED I | FEISON | i iiiiii | Emilio | Davis |

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Part B Continuation Page

| 8. Name and address of Business (including trade name, if any), | 9. Business deals with: |
|---|--|
| Name and address of Business (including trade name, if any). Name San Diego Elec. Training Actrin. Svcs. Corp. Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 4675 Viewridge Ave., #D City San Diego State California ZIP Code + 4 92123 10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any | a. Labor Organization b. Trust c. Employer 11.a. Nature of such dealing. Appointed by IBEW Local 569 as a labor Trustee. |
| Street City State 7/9 Code # 4 | |
| State ZIP Code + 4 | 11.b. Approximate dollar value of such dealing. \$0 12.a. Nature of interest held or income received. Meals provided at scheduled Trustees' meetings. |
| | 12.b. Amount. \$62 |